

Ohio Campaign Finance Report

1012

Prescribed by Secretary of State 3/03

10 JUL -7 PM 3:10

Name of Committee CITIZENS FOR WESTERVILLE				Registration Number, if PAC FRANKLIN COUNTY BOARD OF ELECTIONS						
Name of Candidate										
Address 571 CATAWBA AVE				Office Sought		District				
WESTERVILLE				State OH		Zip Code 43081				
Frequency of Report Check to the left of report	<input type="checkbox"/>	Pre-Primary	<input type="checkbox"/>	Post-Primary	<input type="checkbox"/>	Pro-General	<input type="checkbox"/>	Post-General	<input type="checkbox"/>	Annual Year
	<input type="checkbox"/>	July Monthly	<input type="checkbox"/>	August Monthly	<input type="checkbox"/>	September Monthly	<input type="checkbox"/>	Termination	<input checked="" type="checkbox"/>	Semiannual
Filed Report?	<input checked="" type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Report Electronically Filed?	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No	Date of Election	11/04/08			

Reports are required only during an election year; if total contributions and expenditures each total \$500 or less during the combined pre- and post-periods at one election, check box ()
 Additional forms are required for a post-primary or post-general period, if above statement applies. See R.C. 3517.10(H) for details.

1. Amount brought forward from last report	\$	291	60
2. Total monetary contributions (From Form No. 31-A)	\$	-	0-
3. Total other income (From Form No. 31-A-2)	\$	-	0-
4. Total funds available (sum of lines 1, 2, 3)	\$	291	60
5. Total monetary expenditures (From Form No. 31-B)	\$	-	0-
6. Balance on hand (line 4 minus line 5)	\$	291	60
7. Value of in-kind contributions received (From Form No. 31-J-1)	\$	-	0-
8. Value of in-kind contributions made (From Form No. 31-J-2)	\$	-	0-
9. Outstanding loans owed by committee (From Form No. 31-C)	\$	1,175	00
10. Outstanding debts owed by committee (From Form No. 31-N)	\$	-	0-
11. Outstanding loans owed to committee (From Form No. 31-K)	\$	-	0-
12. Value of independent expenditures made (From Form No. 31-U)	\$	-	0-
13. For Electronic Filing Entities only Sum of lines 7, 7, and amount of any new loans received this period.	\$		

INFORMATION CONTAINED IN THIS REPORT IS MADE UNDER THE PENALTY OF ELECTION FALSIFICATION, WHOEVER COMMITS ELECTION FALSIFICATION IS GUILTY OF A FELONY OF THE FIFTH DEGREE.

J. MIKAL TOWNSLEY
Name and Title (Treasurer and Deputy Treasurer only)

J. Mikal Townsley
Signature

7/4/10
Date

Function pages **0**

Expenditure pages **0**

Other pages **0**

Total pages **2**

Statement of Loans Received

Prescribed by Secretary of State 3/05

Full Name of Committee CITIZENS FOR WESTERVILLE												
From Whom Received BRUCE D. BAILEY							Prior Amount \$ 1,175.00		Amt. Incurred this Period - 0 -			
Address 1078 DENMAN CT									Outstanding Balance \$ 1,175.00			
City WESTERVILLE		State OH	Zip Code 43081		Loans Received This Period				Payments This Period			
					Date		Amount		Date		Amount	
					M	D	Y	\$	M	D	Y	\$
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC					M	D	Y	\$	M	D	Y	\$
Employer/Occupation/Labor Organization*					M	D	Y	\$	M	D	Y	\$
ATTORNEY												

From Whom Received												
Address							Prior Amount		Amt. Incurred this Period			
City									Outstanding Balance			
State		Zip Code		Loans Received This Period				Payments This Period				
OH				Date		Amount		Date		Amount		
				M	D	Y	\$	M	D	Y	\$	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC					M	D	Y	\$	M	D	Y	\$
Employer/Occupation/Labor Organization*					M	D	Y	\$	M	D	Y	\$

From Whom Received												
Address							Prior Amount		Amt. Incurred this Period			
City									Outstanding Balance			
State		Zip Code		Loans Received This Period				Payments This Period				
OH				Date		Amount		Date		Amount		
				M	D	Y	\$	M	D	Y	\$	
Date Loan was originally Incurred		M	D	Y	M	D	Y	\$	M	D	Y	\$
Registration Number, if PAC					M	D	Y	\$	M	D	Y	\$
Employer/Occupation/Labor Organization*					M	D	Y	\$	M	D	Y	\$

* Required for contributions from individuals over \$100 to statewide and general assembly candidates. If contributor is self-employed, the occupation and the name of the individual's business, if any, rather than employer should be listed. If two or more employees contribute via payroll deduction and exceed the aggregate of \$100, the labor organization of which the employees are members, if any, must also appear. [R.C. 3517.10(B)(4)]

If a loan is forgiven, write "Forgiven" in the "Outstanding Balance" space. Transfer total of all loans received this period to the Statement of Other Income (Form No. 31-A-2). Transfer total of all payments made in this period to the Statement of Expenditures (Form No. 31-B). Transfer Outstanding Balance to the Cover page (Form No. 30-A).

- 1 Total prior amount \$ \$ 1,175.00
- 2 Total received this period \$ \$ - 0 - (To Form No. 31-A-2)
- 3 Total payments this period \$ \$ - 0 - (To Form No. 31-B)
- 4 Total Outstanding Balance \$ \$ 1,175.00 (To Form No. 30-A)